HCBD SBAIR



SB 418

Section 4. Conditions for state employee group benefit plans.

"As a condition for the expenditure of the funding for the biennium beginning July 1, 2015, for the state employee group benefit plans, the department of administration shall consider cost containment measures. Options for cost containment measures include but are not limited to..."



Improve primary care case management and coordinated care to improve medical outcomes and reduce costs...



ISSUE: Efforts coordinated to "move the dial" and lower costs

What we're doing:

- Montana Health Centers provide primary care focus
- VERISK Population Management Software
- Dr. Burkholder Consultant
- RX management
 - HCBD Case Manager Working with Vendor on specialty RX



Share data with providers to identify and reduce inappropriate use or overuse of services...



ISSUE: Data Analysis with effective results

- CIGNA/Allegiance Network
 - ✓ Shared cost and quality results with MT facilities.
- HCBD Data Analysis
 - ✓ MAHCP Data Analysis and Reporting Services cancelled July 1, 2015
 - ✓ HCBD Data Analyst. Develop internal Data Warehouse.
 - ✓ Utilizing VERISK Population Management Software
 - ✓ Audit staff working on billing practices radiology
- Benefit Plan
 - ✓ Changes to address potential abuse or overuse



Implement pilot programs to improve health outcomes, such as programs for addressing pain management, emergency department use, and drug or alcohol addiction or abuse...



ISSUE: Focused efforts to address high cost, high utilization, member needs

Data analytics will target focus areas

- Revisiting Incentive Program
- Clinical/HCBD Team
 - ✓ CareHere, Dr. Burkholder, and HCBD staff drafting guidelines for pain management program and looking at other programs to address specific areas
- EAP Program
 - ✓ Current Pilot Program
 - ✓ RFP review to be completed in June 2015
 - ✓ Soft implementation in October 2015
 - √ Full implementation in 2016



Increase cost-efficiency of the state health clinics, including recommendations for services and controls on or review of referrals...



ISSUE: Are the State Health Clinics services meeting plan needs?

- Initial Review of Montana Health Centers
 - ✓ Changes in 3rd party contracts
 - ✓ Refocus on Primary Care (CareHere Model)
 - ✓ Eliminated Other Services
- Wellness Services
- Medical Director Role
- Data Services Reviewed
- Contract Renewal



Implement a network-based or referencebased pricing arrangement, or both, with health care facilities, health care providers, and medical transport providers, considering a multiple of Medicare rates to establish a contract of network providers or as a reference-based pricing model for the arrangement...



ISSUE: Utilize RBP or other models to control costs..

- Air Ambulance Study
- Retire Private Exchange Study
- Working with CIGNA/Allegiance Network on possible Reference Based Pricing options



Amend contracts, to the extent possible, for the state health clinics to require copayments equal to the copayments required by the state employee group benefit plans for similar services...



ISSUE: Health Center similar to retail clinic model for less cost to the plan and level playing field with private providers?

- Employer On-Site Clinic Model
 - ✓ Access, Cost, Quality
 - ✓ No-Copay removes access barriers
 - ✓ Completed initial analysis: Does the cost benefit of the Health Center outweigh the income benefit of a co-pay?
 - ✓ Review of patient visits did not show excessive utilization by members
 - ✓ Actuary 2nd Year Study



Require a contractor or third-party administrator to provide data analytics, professional expertise, and recommendations for improvement of the state employee group benefit plans to the department, SEGBAC and the legislative finance committee...



ISSUE: DOA, SEGBAC and Legislative Finance Committee have information to understand and/or address health plan issues

- HCBD Data Analytics Function
- Regular reporting
- What else would SEGBAC like to see?

